BESLAVAII ABI F COPY													
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									Application or Docket Number $89/733/90$				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					1
TOTAL CLAIMS			22		1			RATE	FEE	OR 7	RATE	FEE	ł
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	+	الم	BASIC FEE		ł
TOTAL CHARGEABLE CLAIMS			22 minus 20=		· 2-			X\$ 9=		1	3/242		Į,
INDEPENDENT CLAIMS			7 minus 3 =		• 4				 -	OR		360	L
MULTIPLE DEPENDENT CLAIM P						'	X40=			OR	X80=	32e.	1
* If the difference in column 4 is			Jana Abasa a					+135=		OR	+270=		
11	. /		less than zero, enter "0" in column 2			•	TOTAL		OR	TOTAL	1066.	12	
1	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								ENTITY	OR	OTHER SMALL		
AMENOMENT A.		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· dd	Minus	· a	8	s /		X\$ 9=		OR	X\$18=	1	į
	Independent	· 7	Minus		<u> </u>	= /		X40=		OR	X80=	/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O				CLAIM			+135=		OR	+270=	/	•
	8-8-5						L	TOTAL DDIT. FEE		00	YOTAL ADDIT, FEE		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	:00	Minus	" 8	2	/ <u>-</u>		X\$ 9=		OR	X\$18=		
	Independent	· 6	Minus	•••	<u>7</u>]= \P	ľ	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.070		
							L	+135= TOTAL		OR	+270= · TOTAL		
		(Column 1)		(0.1	•		A	DOIT. FEE	لـــــــــــــــــــــــــــــــــــــ	OR ,	DDIT. FEE		
MENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	All an overe	(Colum HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		-		X\$ 9=			X\$18=	FEE	<u> </u>
	independent	•	Minus	•••		-	+	X40=		OR			
1	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		-	^4U=.		OR	X80=		
If the entiry in column 1 is less than the entry in column 2, write 17 in column 2										OR	+270=	·	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-675 (Rev. 8/00)